Address at the same of the sam	R THAN ENTITY	
(Column 1) (Column 2) TYPE C OR SMAL		
TOTAL CLAIMS RATE   FEE   RATE	FEE	
FOR NUMBER FILED NUMBER EXTRA BASIC FEE 375.00 OR BASIC FE		
TOTAL CHARGEABLE CLAIMS / minus 20= * 17 X\$ 9= OR X\$18=		
INDEPENDENT CLAIMS 3 mirrus 3 = 8		
MULTIPLE DEPENDENT CLAIM PRESENT		
* If the difference in column 1 is less than zero, enter "0" in column 2		
CLAIMS AS AMENDED - PART II OTAL OTHER THAN		
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY		
CLAIMS REMARKING AFTER ANENDMENT REGHEST NAMERER PRESENT EXTRA  RATE TIONAL FEE  OR X\$18=  Total  Independent  Total  Tot	ADDI- TIONAL FEE	
Total - 18 Minus - 20 - X\$9= OR X\$18=		
todependent • 3 Minus ••• 3 • X42• OR X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280=		
7074		
ADDIT, FEEOR ADDIT, FEE		
CLAIMS REMARKING AFTER AMENDMENT  Total  Independent  Minus  Minu	ADDI- TIONAL FEE	
Total / Minus a 20 . X\$ 9a OR X\$18a		
Independent   Minus		
+140= OR +280=		
TOTAL OR TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)		
CLAIMS HIGHEST REMAINING MUMBER PRESENT AFTER PREVIOUSLY EXTRA  AMERICAMENT PAID FOR  HIGHEST PRESENT EXTRA  RATE FEE	ADDI- TIONAL FEE	
© Total • /5 Minus → 20 - xs 9= OR xs 18=		
Total • /5 Minus • 20 • X\$ 9= OR X\$16= Independent • 3 Minus • 3 FERST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  FERST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		
PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280=		
* If the entry in column 1 is less than the eatry in column 2, with "O' in column 3.  **Hote Trighest Number Previously Paid For UNTHS SPACE is less than 20, enter 20.**  Appet For Appet For UNTHS SPACE is less than 20, enter 20.**		
"If the "Righest Humber Previously Paid For" (Rotal or Independent) is the highest number tound in the appropriate box in column 1.		

Application or Docket Number